
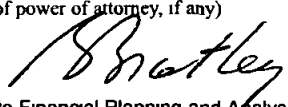


Exhibit B



7017318



UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF NEW YORK		ADMINISTRATIVE PROOF OF CLAIM
<p><input checked="" type="checkbox"/> Name of Debtor (Check only one)</p> <p><input type="checkbox"/> Motors Liquidation Company (f/k/a General Motors Corporation) 09-50026 (REG)</p> <p><input type="checkbox"/> MLCS, LLC (f/k/a Saturn, LLC) 09-50027 (REG)</p> <p><input type="checkbox"/> MLCS Distribution Corporation (f/k/a Saturn Distribution Corporation) 09-50028 (REG)</p> <p><input type="checkbox"/> MLC of Harlem, Inc (f/k/a Chevrolet-Saturn of Harlem, Inc) 09-13558 (REG)</p> <p><input type="checkbox"/> Remediation and Liability Management Company, Inc (subsidiary of General Motors Corporation) 09-50029 (REG)</p> <p><input type="checkbox"/> Environmental Corporate Remediation Company, Inc (subsidiary of General Motors Corporation) 09-50030 (REG)</p>		 ADMINISTRATIVE CLAIM FILED - 71111 MOTORS LIQUIDATION COMPANY F/K/A GENERAL MOTORS CORP SDNY # 09-50026 (REG)
<p>The deadline for each person or entity (including, without limitation, individuals, partnerships, corporations, joint ventures, governmental entities, and trusts) to file a proof of claim for certain administrative expenses against the Debtors is (i) on or before February 14, 2011 at 5 00 p m (Eastern Time), with respect to administrative expenses arising between June 1, 2009 and January 31, 2011, and (ii) the date that is thirty (30) days after the Effective Date at 5 00 p m (Eastern Time), with respect to administrative expenses arising between February 1, 2011 and the Effective Date</p>		
<p>Name of Creditor (The person or other entity to whom the debtor owes money or property) GENERAL MOTORS LLC</p>	<p><input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars</p> <p><input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case</p> <p><input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court</p>	
<p>Name and address where notices should be sent GENERAL MOTORS LLC 400 RENAISSANCE CENTER DETROIT, MI 48265</p>	<p>Telephone Number</p>	
<p>Last four digits of account or other number by which creditor identifies debtor</p>	<p>Check here <input type="checkbox"/> replaces a previously filed claim, dated _____ if this claim <input type="checkbox"/> amends</p>	
<p>1. Basis for Claim</p> <p><input type="checkbox"/> Goods sold</p> <p><input type="checkbox"/> Services performed</p> <p><input type="checkbox"/> Money loaned</p> <p><input type="checkbox"/> Personal injury/wrongful death</p> <p><input type="checkbox"/> Taxes</p> <p><input checked="" type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a)</p> <p><input type="checkbox"/> Wages, salaries, and compensation (fill out below)</p> <p style="margin-left: 100px;">Last four digits of SS# _____</p> <p style="margin-left: 100px;">Unpaid compensation for services performed from _____ to _____ (date) (date)</p>		
<p>2. Date debt was incurred (must be on or after June 1, 2009):</p>	<p>3. If court judgment, date obtained:</p>	
<p>4. Total Amount of Administrative Claim : \$ _____ Unliquidated</p> <p><input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges</p>		
<p>5. Brief Description of Administrative Expense Claim (attach any additional information):</p> <p>See Attachment</p>	<p>6. Credits: All payments made on this claim have been credited and deducted for the purpose of making this proof of claim.</p>	
<p>7. Supporting Documents:</p> <p>Attach copies of supporting document, such as promissory notes, contracts, security agreements, and evidence of perfection of liens DO NOT SEND ORIGINAL DOCUMENTS</p>	<p>8. This Administrative Proof of Claim:</p> <p><input checked="" type="checkbox"/> is the first filed proof of claim evidencing the claim asserted herein</p> <p><input type="checkbox"/> supplements a proof of claim filed on or about _____</p> <p><input type="checkbox"/> replaces/supersedes a proof of claim filed on _____</p>	
<p>9. Date-Stamped Copy: To receive an acknowledgement of the filing to your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim</p>		
<p>Date 4/25/2011</p>	<p>Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any)</p> <p>Russell S Bratley  Director - Corporate Financial Planning and Analysis</p>	<p>THIS PAGE IS FOR COURT USE</p> <p style="text-align: center;">S.D.N.Y.</p> <p style="text-align: center;">FILED</p> <p style="text-align: center;">U.S. BANKRUPTCY COURT</p> <p style="text-align: center;">2011 APR 26 P 1:01</p>
<p>Penalty for presenting fraudulent claim Fine up to \$500,000 or imprisonment for up to 5 years, or both 18 U.S.C. §§ 152 and 3571</p>		

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